STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUN 02 2017

PLEASE PRINT

I. Name of Lobbyist(s) KAMLERY	Coroni	9			VV HAMPSHIRE RTMENT OF STATE
II. Name of lobbyist'	s partnership, firm or	corporation, if a	ny:			
Breathe New 145 Hollis St., Manchester,		corporation)				
Business Address: (St	reet)	(Town/City)	- 11.	(State)	(Zip Code)	
(603) 669-2411 (Telephone)	603	R) 645-622 (Fax)	O e-ma	ii <i>Koroni</i> s	Ebreathen.	h.org
III. This statement coreportable expense to	overs: (Choose one – fi ransactions which are	ile separate repor not attributable t	ts for each client o any one client)	t, OR you may	file a separate rep	oort for
All reportable tran	sactions occurring in th	e months prior to t	the reporting date	relative to the	following client:	
 <u>OR</u>	(Full Name of Client as	it appears on the Lol	bbyist Registration	Form)		
☐ All reportable trans unrelated to any partic	actions by the lobbyist ular client.	(including the lob)	byist's family), or	r the lobbying f	īrm listed below wl	hich are
IV. Date of Report Reports cover: activ	April 26, 2017 Mity from date of registration	on to 3/31/17	July 26, activity from 4/1	2017 [] //17 to 6/30/17		
	October 25, 2017 activity from 7/1/17 to 9/3			31, 2018 🗍 VI/17 to 12/31/17	7	
	no fees received and complete just this form					4.
VI. Check if addition	al reports are attached	d:				
If you have receiv	ed fees or made expend	itures, you must fi	le Addendum A-	- Fees and Exp	enses	
☐ If you have paid a Expense Reimburseme	n honorarium or reimbu ent	irsed expenses, you	u must file Adder	ndum B Repo	rt of Honorariums	or
=	or your family has mad	e political contribu	itions, you must f	ile Addendum	C- Political Contr	ibutions
I have read RSA 15, R and complete to the be	irmation by Lobbyist SA 15-B, RSA 14-C an st of my knowledge and cocombs Coronts st)	i belief.		firm that the for (Date)		is true
(Print Name of lobby	st)					

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

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(RSA Chapter 15:6)

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1/	NEW HAMPSHIRE
I. Name of Lobbyist(s) KMBELLY CROSS	DEPARTMENT OF STATE
II. Name of lobbyist's partnership, firm or corporation, if any:	
BLOATTE NEW HAMPSHIRE (Name of partnership, firm or corporation)	
(Name of partnership, firm or corporation)	
III. Name of Client	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses:	nt relations, or public relations services
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar	
c) Total of all fees received to date (Add lines a and b)	c) \$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office of individual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobb (c) an itemized statement of each individual expenditure made during this repany purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorarium contributions will be reported on separate addendums and should not be reported.	reclient and if expenditures are made by may be filed for the lobbyist(s)/firm. The aggregate total of all expenses paid expenses; (b) the aggregate total of all ple: meals purchased during a business ess than \$10 that is given to the person ied with a value of \$25.00 or less); and porting period of greater than \$25.00 for lue of greater than \$25, purchase of a ter than \$25, but not greater than \$50, s, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a)\$ <u>1,825,25</u> b)\$ <u>6</u>
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$_1,825,75
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	ns_1,825.25
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
Kimley B. Cerers (Signature of lobbyist) KAMBERLY COLOUTS	5/31/17
VALLEDIN COOKS	(Dute)
(Print Name of lobbyist)	